

JUL 01 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT

In re application of: Little
Application No.: 10/659,049

Attorney Docket No.: 722-X03-054

Examiner: Sellers, Daniel A.

Filed: September 10, 2003

Group: 2644

Title: **A METHOD OF MODIFYING LOW
FREQUENCY COMPONENTS OF A DIGITAL
AUDIO SIGNAL**

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Lissa Oros

Amendment and Response to Non-Final Office Action

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

The enclosed remarks and amendments are submitted in response to the to the Office Action mailed on April 5, 2005. Applicants respectfully request reconsideration of the captioned application in view of the following remarks and amendments. A listing of the claims commences on page 2. Remarks begin on page 4 of this paper.

USSN: 10/659,049

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Atty Dkt No.: 722-X03-054

PTO/SB/21 (04-04)

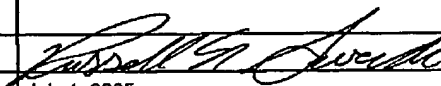
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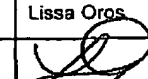
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/659,049	
	Filing Date	September 10, 2003	
	First Named Inventor	Little	
	Art Unit	2644	
	Examiner Name	SELLERS, Daniel A.	
Total Number of Pages in This Submission	6	Attorney Docket Number	722-X03-054

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Russell N. Swerdon
Signature	
Date	July 1, 2005

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Typed or printed name	Lissa Ors		
Signature		Date	July 1, 2005

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